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ABSTRACT

This paper describes the competencies in the domain of human interaction that are required of leaders in various outdoor adventure programs. These programs may be grouped on a continuum from recreational outdoor adventure to primary (adventure) therapy. In the middle of the continuum, educational, enrichment, and adjunctive (adventure) therapy experiences combine fun, learning, and psychotherapy in varying degrees. These programs exist in different environments; have different goals; make use of different processes and activities; are founded on different assumptions, theoretical frameworks, and epistemologies; and utilize different mixes of professional staff. Nonetheless, there are common elements in social construction of the range of what is desirable in outdoor leadership. Clusters of competencies are presented in the form of a role map for the following outdoor leadership roles: skilled outdoor practitioner, limit setter or safety supervisor, enthusiastic adventurer, instructor or coach, group facilitator, expert communicator, human behavior expert, and clinician or therapist. The competencies outlined do not correspond to the systems used by the British or Australian national standards but are intended to transcend the limitations of those systems by incorporating affective as well as cognitive and behavioral elements. An appendix discusses the relationships of adventure therapy to psychotherapy and experiential learning, and outlines difficulties in identifying competencies for adventure therapists. This paper contains 85 references. (SV)

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LEADERSHIP COMPETENCES FOR OUTDOOR ADVENTURE:
FROM RECREATION TO THERAPY

Martin Ringer

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Leadership Competences for Outdoor Adventure: From Recreation to Therapy

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Introduction

I remember sitting at my desk in the middle of an empty office. I was the foundation director and (at that time) sole employee of a new adventure therapy organisation. My next task was to employ other staff. What were the *key* competences, attributes, skills, abilities ... that I was looking for? Nine years later, that question remains with me, and I believe with many other people. This paper is a summary of some of the issues involved in determining the competences required of leaders in outdoor adventure programmes, ranging from recreational programmes to adventure therapy programmes. Whilst the last ten years of my experience have been in the context of adventure therapy programmes, my previous experience includes running leadership training courses for teachers and recreational leaders.

People have been trying to define, describe, train for and assess leadership competences for outdoor adventure for many years and there is a huge body of literature on the topic, so I need first to narrow the focus for this presentation. The question that I will address is "What are the competences in the domain of *human interaction* that are required by adventure leaders?" I am excluding environmental concerns, many aspects of planning, marketing, programme management and a host of other equally important topics. My focus here is quite specifically on what competences an adventure leader needs so that she/he can run an adventure experience that is appropriate for and beneficial to the participants. A second qualifier to this paper is that I use the term "competency" in a different form to that applied by the British National Council for Vocational Qualifications and the Australian National Training Board. My choice of a conceptual framework based in part on Morenian (constructivist) role theory is explained more fully in the context of my discussion on outdoor adventure leadership roles (below).

There are a myriad of forms of outdoor adventure, so let's sort them into categories so that we can make some generalisations. What types of outdoor adventure programmes are there, and what do we call them? Michael Gass (1993f) has described five domains, as in Fig. 1.

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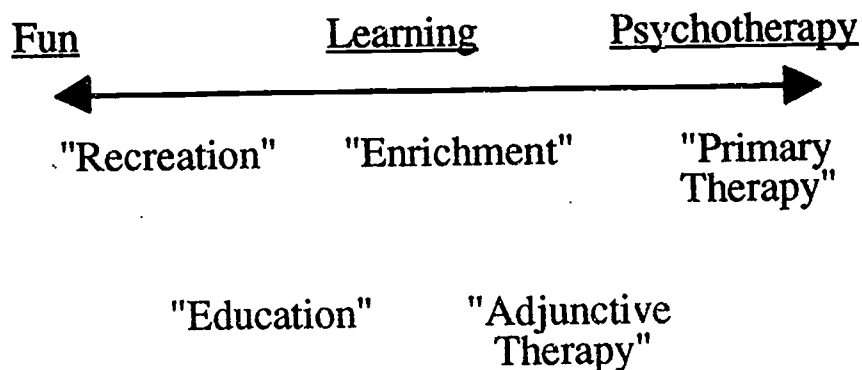


Figure 1. Forms of adventure experience
(Adapted from Gass, 1993)

Figure 1 shows fun as the primary goal of recreational outdoor adventure. Conversely, "primary [adventure] therapy" is a form of group psychotherapy. In between, "educational", "enrichment" and "adjunctive [adventure] therapy" experiences combine fun, learning and psychotherapy in varying degrees.

It seems to me that to be a skilled primary adventure therapist, a leader needs to have all of the competences required by a recreational leader plus specialist competences in therapy. So let's start with the concept of "foundation" competences, as required by recreational adventure leaders, then add the specialist competences required as we move to enrichment, then adjunctive therapy and finally to primary therapy. Figure 2 illustrates this.

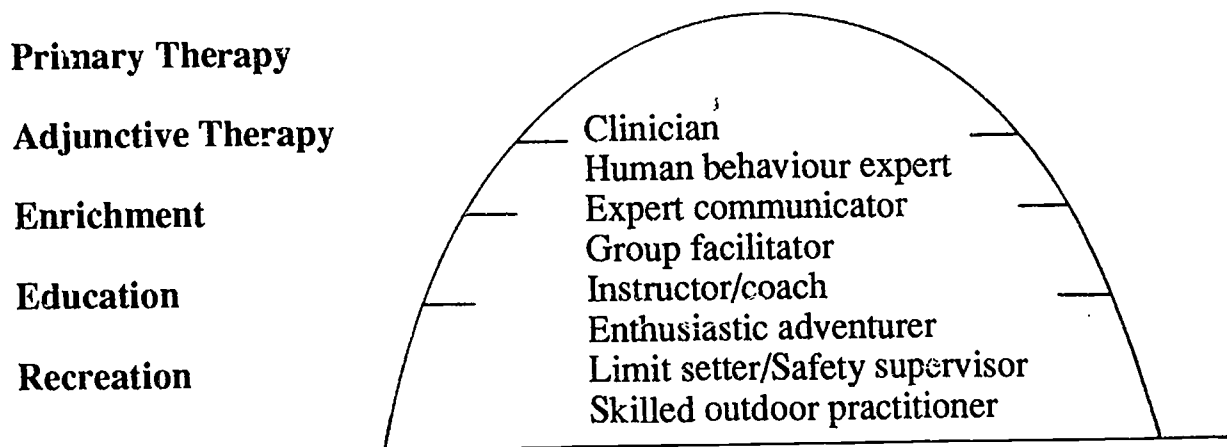


Figure 2. Outdoor leadership roles in relation to level of activity

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In Figure 2, related competences are grouped under one role name (eg the "skilled outdoor practitioner"). A role is a group of competences. Each competency in the same role is related to the others in that role, in that they share common elements in all of the five main domains that make up a role. These domains are thinking (cognition), feeling (affect), action, context and consequence (Williams, 1989). For example, the "skilled outdoor practitioner" role includes the competences that are usually described as "hard skills". The thinking (cognition) element of the role includes technical knowledge of the activity being led. The feeling (affect) element is usually confidence in one's own competence and in the equipment - if that is appropriate at the time. Action in the role is the demonstration of technical competence in the activity.

The context is the adventure experience and setting, and the consequence is that participants experience the leader as being competent. Now, before moving on to a detailed description of the roles of the outdoor leader, let us briefly examine the relationship between my role analysis and the NCVQ framework.

Those of you who are familiar with the NCVQ standards in Britain or the NTB standards in Australia (Board, 1991) (ILB., 1992) may be concerned that the description of competency in this paper does not correspond with the NCVQ system. However, this paper is intended to supplement and enrich the rigorous treatment of competences produced by these national bodies, because the life gets drained out of the whole business of leadership when such absolute rigour is applied. We are primarily "Development trainers" and whilst NCVQ and NTB competency structure assist with the standardisation of skills training and assessment it has some major limitations in our arena (Doughty, 1993). Using the less rigorous language of "role" with its accompanying "feeling" component is intended to transcend those limitations and to encourage creativity, diversity and personal identification with the rich and exciting field of adventure leadership. Given this rider, let us then move to the role descriptions themselves.

The skilled outdoor practitioner

This role is the fundamental building block of adventure leadership. In simplistic terms, this is the "hard skills" role (although the term "technical outdoor activity skills" seems more appropriate). The schedule below comprises not the actual skills required in each activity, but "meta descriptions" of the skills. More detailed descriptions of these skills can be found in Doughty, 1993; Ewert, 1989; Green, 1990; Ogilvie, 1989; Priest, 1990; Priest, 1987; Raiola, 1990; Stehno, 1993; Stoll, 1990 and Tescher, 1990.

The role of the skilled outdoor practitioner is demonstrated when a leader:

- Performs the physical and technical tasks to a difficulty level that is at least one stage higher than the participants in the given context;
- Completes these physical tasks whilst under severe stress;
- Has sound knowledge of the capabilities of the equipment that is used in each activity;
- Choose equipment, venues and activities that are suitable for the participants;
- Runs activities that the participants find rewarding and that result in their moving towards achieving the goal of the group;

- Performs activities with "flow" that assists participants to have confidence in the leader;
- Is aware of own limits;
- Can explain own actions to participants;
- Runs activities in such a way that meets both the "task" and the "maintenance" needs of the group;
- Acts in ways that avoids pitfalls in activities;
- Has a thorough working knowledge of such pitfalls;
- Acts quickly and effectively in emergencies.

Before moving in, there is an important qualifier that needs to be applied to this and the following competency schedules. They are *not* intended as a prescription. They are provided as a focus for each reader's attention as that leader conducts his/her own inquiry into the most appropriate way for themselves and their trainees to be leaders in the adventure activities. The schedules are intended to inform you of the flavour of the role, not to give you an exhaustive list of the ingredients.

The skills required by the "skilled outdoor practitioner" are described at length in the outdoor literature. Let us turn our attention to less familiar zones (described as "process competences and meta competences [Doughty, 1993], beginning with a look at the interpersonal aspects of safety.

The limit setter/safety supervisor

Often safety is treated as though it is independent of other issues. In my opinion, safety and setting limits are inseparable. Responsible adults usually have a quite well developed sense of danger. They don't want to damage themselves, their leaders or their peers and so they tend to act carefully and responsibly in the face of danger. In contrast, some adolescents who participate in adventure therapy programmes are self-destructive, some want to hurt or maim their peers and some want to damage their leaders. Such extreme situations call for a very highly developed role of limit setter/safety supervisor. The second neglected aspect of safety is that many people fail to understand the importance of psychological safety. Even in recreation groups, some participants need protection from excessive shaming, fear and exposure of incompetence. As the average level of dysfunction of participants increases from recreation through to adjunctive therapy, so does the need for psychological safety.

The limit setter/safety supervisor is the role that is *informed by judgment*. Judgment alone is not enough, it needs to be acted on (Cain, 1990; Priest, 1990a; Rawson, 1990; Stich, 1993). The appropriate setting and management of limits is required to manage both physical and psychological risk, and to promote participant involvement (Ewert, 1989; Johnson, 1991; Whitaker, 1989).

The thinking/construct component of the role is the leader's formulation of the principles of safety as applied to the immediate setting. The feeling/affect component is associated with an acute attention being paid to the leader's own confidence level, misgivings and intuition about the immediate situation. Behaviours associated with the role are all related to gathering information and to establishing and maintaining limits. The context is the adventure therapy setting and the main consequences of enacting the role successfully is that participants experience themselves in an environment that is adventurous but not a source of misadventure.

To achieve this, the leader:

- Describes the limits of physical and psychological safety to the group. Describes reasons where appropriate;
- Negotiates with the group to set some of the limits;
- Reminds participants of the limits when they are or may be transgressed;
- Notices own misgivings and acts on them;
- Trusts own judgment;
- Enforces limits quickly where serious danger is present;
- Reviews the effectiveness of the limits from time to time;
- Redefines limits when the context changes;
- Communicates effectively with other practitioners about safety issues;
- Has knowledge of safety limits that are defined by professional practitioners and regulatory authorities;
- Has knowledge of laws regarding safety, injury and liability.

Again, these examples do not adequately define the role, but they at least give a "taster". Yet each of you will have had an experience with an outdoor leader, a teacher, a lecturer or some significant figure in your lives who is deadly boring and uninspiring yet has all of the technical skills and knowledge required to do the job at hand and all of the safety and limit setting behaviours. Again, with few exceptions (Potas, 1990), modern outdoor leadership literature deals poorly with the essential but somewhat elusive aspect of leadership that provides aliveness. Curiously enough, whilst the now outmoded "attribution" theories of leadership did name the need for inspiration, there is no room for "aliveness" in modern competency based descriptions of leadership (Doughty, 1993). So let us dare to be different, and examine the role of the "experienced enthusiastic adventurer".

Experienced enthusiastic adventurer

The leader's own enthusiasm for adventure is a core requirement for success. Why? Because there must be congruence between the sense of self and "professional identity" of the practitioner, and the form of activity being led by that practitioner. An outdoor recreation leader who is taking a group on a hike because s/he thinks it will be good for, or enjoyable for, the participants, but who has no personal passion for the activity, will not provide the conditions for a quality experience (Hunt, 1989). Additionally, effective educational experiences are best facilitated by persons who have "faith" in themselves and the processes they are using (Freeman, 1992; Neville, 1989). In enrichment and therapy programmes, leaders must be visionary and inspired with a personal knowing of the activities that they are leading (Schoel, 1988). This energy transcends the negativity that is so prevalent in groups of "dysfunctional" participants.

The construct/thinking component of the experienced enthusiastic adventurer consists mainly of a personal knowing or the potential value of adventure experience. The feeling/affect component is a sense of joy and wonder at the capacity of the natural world to provide such precious opportunities. The action component is one of joining in the world of the participants and leading them with stories and modelling towards their own internally motivated drive to experience adventure first hand. The context is the adventure group or the group of potential participants in an adventure experience and the consequence is that participants and potential participants grow in enthusiasm for taking part in an outdoor adventure.

This role of experienced enthusiastic adventurer is demonstrated when the leader:

- Describes adventure activities to others with life and enthusiasm;
- Acts with flow and confidence while performing adventure activities;
- Has memories of many adventure experiences;
- Acts in accordance with having learned from being in a wide range of adventure situations, some enjoyable and some not so enjoyable;
- Demonstrates a willingness to engage in further adventure activities;
- Has experienced the benefit of adventure activities to self;
- Believes in the potential value to others of adventure activities;
- Tells stories of own adventures and listens with interest to others' stories;
- Motivates others by building a picture so others can imagine themselves doing the activity. (Passes on information and links with prospective participants).

At this point we have a leader who can do the required activity, can provide adequate physical and psychological safety and can foster inspiration and aliveness in a group. In some cases this is enough, but without developing the skills of the group members, the action remains totally dependent on the leader doing all of the technical activities. This can be disempowering for participants and in some cases such as canoeing, where participants must learn skills, another leadership role is called for.

Instructor/Coach/Educator/Trainer

Writers on outdoor leadership are in accord that leaders need also to be instructors, coaches and teachers (Doughty, 1993; Phipps, 1990; Priest, 1989; Priest, 1987; Raiola, 1990; Rawson, 1990). One of the key sources of satisfaction for participants in most outdoor adventure activities is a sense of transcending personal limitations. This is done by learning skills for an activity, applying them, experiencing some success and then "internalising" the success or successfully attributing the success to their own (and the group's) actions (O'Brien, 1990). Successful learning of an activity skills depends on the leader having adequate instructional and coaching skills, hence the need for the role of the instructor/educator/trainer. In enrichment and therapy programmes the teaching/learning process in itself can be a core part of the therapeutic process, but participants' behaviours can make the instructional task quite difficult. Thus, all of the domains of outdoor leadership require varying degrees of development of the instructional role.

The construct/thinking component of the instructor/coach consists of a knowledge of teaching and learning theory as well as a set of values that favours experiential learning. The feeling/affect component is a sense of curiosity at how each participant learns, and a sense of excitement as each participant grows in competence. The action component is one of identifying the needs of the participants and responding in the moment to each participant. The context is the adventure group where learning is required or taking place, and the consequence is that participants experience their competence growing as they interact with the leader and their learning tasks.

The instructor/coach/educator/trainer role is present when the leader:

- Has a thorough knowledge of the steps required to successfully complete an activity;
- Communicates the steps required in language and actions that match the experience, ability and fear level of the participants;
- Engages the interest and attention of participants;
- Proceeds with the learning task at a pace that allows successful learning for participants;
- Makes use of the instructional capabilities of group members;
- "Teaches" successfully by a number of methods: didactic, demonstration, coaching, discovery learning, games, and experiential learning;
- Matches the teaching/learning method(s) with the situation;
- Presents the learning experience so that it is integrated with other aspects of the programme. That is, the learning experience has meaning to participants;
- Performs "tasks" and "maintenance" functions with the group during the learning experience;
- Presents only information that is interesting, useful or relevant to participants at the time;

- Has practical and theoretical knowledge that is at least one level beyond that currently being taught;
- Observes and acts on information about own role state and the state of the group.

The leader who has all four of the above roles well developed is in a position to lead most well motivated recreational groups with a reasonable degree of success. However, if the purpose of the group is educational or enrichment, or if the group members are reluctant participants, two more roles are required. They are the "group facilitator" and the "expert communicator/relator". These two roles are examined next.

Group facilitator

Adequate management of all but self-motivated recreation groups requires a working knowledge of group process and an ability to use these principles to assist the group in achieving its purpose (Whitaker, 1989). In particular, facilitation assists the development of group cohesion, motivation, resilience and the transfer of learning from the adventure activity to the participants' everyday life (Gass, 1993d; Kerr, 1987; Priest, 1993; Raiola, 1986; Rawson, 1990). Leaders who cross the boundary between education and therapy need even more sophisticated group facilitation skills and knowledge.

As the level of difficulty of the group increases, so does the required level of sophistication of the facilitator's competences (Corey, 1985; Gass, 1993f; Gerstein, 199#; Handley, 1992; McPhee, 1993; Nadler, 1993; O'Brien, 1990; Smith, 1993).

No attempt is made in the following schedule of role descriptors to differentiate the depth to which facilitation competences are required for different groups. Clarity on this issue can be gained from an examination of the last two roles in this schedule: the "human behaviour expert" and the "clinician".

The construct/thinking component of the group facilitator includes a knowledge of self and a knowledge of group process as well as a valuing of the potential of the group to create positive experiences. The feeling/affect components include confidence in one's own competence and ability to nurture self and others in the context of a group. The action component is one speaking, moving and directing one's attention in a way that enables the group to move towards its goal. The context is the adventure group itself, and the consequence is that participants experience the group moving towards its goal.

The generalised role of the "group facilitator" is present when the leader:

- Has basic knowledge of group work theory;
- Manages self in times of stress and duress;
- Creates a group environment of mutual interdependence with clear boundaries ;
- Constantly acts in ways that assist the group to reach its goal;
- Encourages group members to build their own skills;
- Coaches group members in appropriate ways to behave in groups;

- Behaves in accordance with the group context, stage of group development, group purpose, etc.
- Models behaviour that is appropriate for participants;
- Provides variety and freshness in the facilitation process;
- Encourages balanced participation from group members;
- Establishes and maintains limits in the group to promote psychological safety and a participative working environment;
- Promotes fun and enjoyment in the group;
- Responds to participants in ways that promote the development of useful ways of being in their everyday world;
- Plans activities that are likely to set the scene for growth promoting action and interaction;
- Intervenes when participants act in ways that seem to lead to development or behaviours or reinforcement of behaviours in participants that are not useful;
- Acts in ways that are compatible with the ethnicity, gender and culture of participants;
- Maintains a constant watch on own emotional and intuitive responses as well as words and actions, and checks for interference from own unresolved issues;
- Maintains curiosity in the moment about the whole group process;
- Observes participants functioning and compares observations with known frameworks for human behaviour, then develops action plans.

All of these competences relate to the group-as-a-whole. Yet many of the exchanges between leader and participant in adventure experiences occur on a one-to-one basis (Chase, 1990). One-to-one communication competences are described under the role of the expert communicator.

Expert communicator/relator

Similar to the facilitator competences named above, quite unsophisticated communication techniques suffice for leaders of well motivated recreation groups, but as the level of difficulty of group rises, so does the need for competence in communicating on a one-to-one basis. The continuum of one-to-one communication ranges from conversation, through interviewing, counselling and on to therapy (Ivey, 1987). Generic research on outdoor leadership competences identified the need for basic interpersonal skills (Phipps, 1986; Priest, 1987; Raiola, 1992) and more specialised interpersonal skills are prescribed by writers on adventure therapy and psychotherapy. The competences required in the arena of adventure therapy are included in the role of the clinician.

The construct/thinking component of the expert communicator role consists mainly of an understanding of self and a knowledge of models of human interaction. The feeling/affect component is one of pleasure in being able to express and maintain one's own needs at the same time as meeting the needs of the other. The action component is one of joining in the world of the participant, enabling the participant to express his/her concerns whilst the leader also conveys important facts and feelings. The context is the one-to-one relationship in the overall setting of the adventure group and the consequence is that the participant who is involved in the one-to-one conversation experiences her/himself as being treated with respect and dignity.

The role of the expert communicator/relator is manifested when the leader:

- Establishes empathy with participant;
- States own needs clearly and appropriately;
- Reflects back participant's thinking and feeling and meaning of verbal and non-verbal communication;
- Uses physical space in ways that are appropriate to the participants, the leader and the setting;
- Deals with conflict in ways that lead to task completion and maintenance of the relationship where possible or termination of the relationship with minimum trauma;
- Manages own disturbance and distress;
- Discloses own thinking and feeling in ways that are helpful to the relationship, the participant and self;
- Varies style to match the participants, setting and context;
- Acts as model for constructive interpersonal behaviour to participants.

The group facilitator and the expert communicator/relator are roles that need to be at least partly developed in many outdoor leaders, but the last two in this series are specialist therapeutic roles. Of these, the "human behaviour expert" provides a storehouse of knowledge about the psychological make-up of group members and the "clinician" comprises the specialist competences that are required to enter the area of adventure therapy.

Specialist roles for adventure therapists

Whilst much has been written on the competences required by outdoor leaders, few authors have adequately addressed the particular competences required by specialist outdoor leaders who apply clinical therapeutic processes to their outdoor adventure work. A detailed analysis of the reasons for and consequences of this relative lack of written material is presented in the appendix to this paper.

In summary, adventure therapy occurs in a very diverse context. A diverse range of professionals staff such programmes, using an equally diverse set of underpinning theories models and therapeutic orientations; categories of client range from psychopath to sexual abuse victim; programme goals vary widely; funding sources dictate different approaches and programme goals; the type of activity carried out as vehicle for therapy varies widely; and finally, programmes range from "stand alone" short term interventions to highly integrated long term community based.

Such a diverse context makes the task of describing leadership competences for adventure therapists a daunting task. In short, it is not possible to be global or prescriptive. Each adventure therapist must respond appropriately to the organisational, societal, professional, situational etc context in which they find themselves. Nonetheless, the author has distilled descriptions of therapeutic competences that may assist the reader to organise her/his own perceptions to a greater degree, from his own experience, interviews, literature searches, seminars, conferences and intuition.

Adventure therapists need competences that enable them to operate with groups comprised mainly of difficult or challenging members and in ways that maximise the therapeutic potential of the adventure activities. These additional competences must be able to be applied in one-to-one situations and in group settings.

These additional competences have been grouped under a role named the "clinician" and the "human behaviour expert". These roles are comprised of the competences that differentiate an adventure therapist from a recreational or educational outdoor leader. Whilst few authors have made this distinction, some emphasised the need for adventure therapists to have particular skills such as diagnostic skills (Cline, 1993), analytical ability, writing skills, and familiarity with basic psychotherapy (Kimball, 1993b), advanced clinical skills and group therapy (Roland, 1993), psychological "first aid" (Smith, 1993). Jaclyn Gerstein concluded from her Ed.D research project that "adventure based counsellors" should have at least the 22 group counselling skills listed by Corey (1985).

Thus, practitioners, writers and researchers in adventure counselling and therapy indicate the need for skills additional to conventional outdoor leadership skills. But first, a caution:

No one practitioner in an adventure therapy programme could be expected to demonstrate all of the competences listed above and below. Each programme will employ a staff with a range of skills, abilities, knowledge and attributes so that the required roles are distributed throughout the programme staff.

Human behaviour expert

This role enables the adventure leader to articulate the mental models (Senge, 1992) that underlie his or her leadership actions and to communicate with others to develop effective collaboratively-led activities. Whilst many of us claim to operate "intuitively", closer examination inevitably draws out implicit or explicit models and theories that enable us to make meaning of our experience (Bateson, 1972; Freeman, 1993). Furthermore, the capacity to name and reflect on our own ways of constructing meaning is essential for our own learning (Doughty, 1993).

The construct/thinking component of the human behaviour expert role consists mainly of a knowledge of models of self, human development, human psychopathology and "normal" human personality. The feeling/affect component is one of curiosity about and interest in the "human condition" and means of working constructively in the adventure setting. The action component is one of engaging with others in the world of ideas about what you are doing with your clients, why you are doing it and how it all fits or doesn't fit with theories and models of human behaviour. The context is the adventure therapy programme; conversations with other practitioners and professionals and the consequence is that yourself and others involved in the programme develop your professionalism and effectiveness.

The human behaviour expert:

- Has basic knowledge of a range of theories of human behaviour and personality that enables the leader to recognise behaviours that are outside the normal;
- Can apply basic knowledge of human relationships in ways that lead to individual participants and the group as a whole meeting its needs;
- Is able to learn new models that are used in the particular organisational context in which the leader is working;
- Can reflect on the participants' behaviour and can usually make sense of it in terms of a model of human behaviour;
- Can converse about own work with other persons who have a basic knowledge of human behaviour;
- Often observes and reflects on own behaviour and can discuss own behaviour using basic models of human behaviour;
- Sees human behaviour as a systems phenomenon and not simply the result of cause and effect;
- Maintains curiosity and spirit of inquiry even when times are difficult;
- Integrates theoretical knowledge with own functioning;
- Is able to articulate some of own underlying assumptions, values and "mental models".

Yet knowledge of and application of the principles of human behaviour are not enough in adventure therapy. The therapist must also be able to implement a strategic therapeutic programme that is suited to the current client group. Hence the need for the clinician role.

The clinician

Clinical competences are usually associated with a particular school of psychotherapy (Zeig, 1990), but in the case of this paper, a detailed breakdown of clinical competences on a "school by school" basis is not warranted. Hence, competences listed here are intended to be "meta" (of a higher logical type) to the competences required by any one school of psychotherapy. The schedule is derived in part from other authors in the field of psychotherapy: (Bateson, 1972; Bloch, 1985; Freeman, 1993; Glasser, 1965; Ivey, 1987; Kipper, 1986; Mahoney, 1991; Mears, 1992; O'Brien, 1990; Ross, 1991; Williams, 1989; Williams, 1991; Yalom, 1985; Zeig, 1990).

However, adventure therapy also calls for a set of competences that are not required in "sitting and talking" forms of therapy. These competences are identified by authors on adventure therapy and action-related forms of therapy: (Bacon, 1993; Bandoroff, 1992; Berman, 1989; Bunting, 1991; Cline, 1993; Farrager, 1993; Feeney, 1989; Fiedeldey, 1991; Gass, 1993b; Gass, 1993c; Gass, 1993g; Gerstein, 1992b; Handley, 1992; Henley, 1989; Hopkins, 1985; Kimball, 1993a; Kimball, 1993b; Nadler, 1993; Simmonds, 1991; Smith, 1993; Tippet, 1993; Wichmann, 1993).

Clearly the number and range of possible therapeutic competences demonstrated by an adventure therapist is huge. In producing the schedule below, no attempt was made to be exhaustive. Nonetheless, the following competences are intended to be representative of a skilled adventure therapist.

The construct/thinking component of the clinician role consists mainly of a knowledge of ways of applying the models of human personality (from the human behaviour expert role) to the practice of adventure therapy. The feeling/affect component is a respectful excitement about the potential for one's own actions and the adventure activity to transform the lives of clients (accompanied by humility about the limited influence that we can have!). The action component is one of putting into place activities, talk sessions and various forms of interaction that are the "guts" of adventure therapy. The context is varied widely and includes all parts of the adventure therapy programme. Every interaction that the client has with any part of an adventure therapy programme can be important, from the first pre-entry interview to asking the administrator for more string to intensive action-packed outdoor adventure experiences. Finally, the consequence of enacting the role is that participants find themselves changing in ways that enhance their chances of leading satisfying and socially acceptable lifestyles in the future.

Such a person:

- Has sound knowledge of at least one model of "normal" human development and the consequences of developmental arrests;
- Has a sound working knowledge of at least one model of psychotherapy;
- Is aware of the major forms of "mental illness" and how to recognise them;
- Can continue to function adequately in the presence of extreme forms of acting out, such as violence, rage and psychotic episodes;
- Can assess the level of functioning of participants (in terms of at least one theory of personality) by observing them in action;

- Can develop action plans for participants (based on assessment) to provide them with opportunities for development. Such action plans are based on strategic application of activities and are designed to match the participant's developmental needs;
- Can assess participants' progress in terms of therapeutic goals;
- Reviews revised therapeutic goals in the light of new information;
- Regularly assesses the efficacy of own functioning;
- Can communicate effectively with clients (including clients' significant others), other non-clinical staff and programme management about the adventure therapy processes that are being implemented.

Summary/conclusion

The leadership competences required of staff in adventure programmes vary widely and there is no one prescription that covers all possibilities. The competences required in each programme are very much contextual. Programmes range in purpose from recreational to strategic therapy. Each programme exists in a different environment, has different goals, makes use of different processes and activities. Each programme has different underlying assumptions, theoretical frameworks and epistemologies. Each programme utilises different mixes of professional staff. Nonetheless, in the context of Western society there are some common elements in our social construction of the range of what is desirable in outdoor leadership. The author has attempted (albeit by looking through the lens of his own epistemology) to distil the patterns from these clusters of competences and to present them in the form of a role map. No one leader can be expected to demonstrate all of the competences listed, even though the list is not exhaustive. Such a role cluster is presented as the competences that would be distributed throughout the whole programme staff.

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Final note

The author would welcome comments on the model presented above.

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Appendix: A discussion of the origin adventure therapy roles

There are two ways in which general outdoor leadership literature and training programmes fall short of meeting the needs of adventure therapists who work with "difficult" clients or clients who are partaking in strategic therapy in the context of an outdoor programme. Firstly, many outdoor leadership writers and educators are not equipped to write about or instruct in the specialised therapeutic skills required (Phipps, 1990) and secondly, few writers in the mainstream of outdoor leadership have an adequate understanding of the special needs of the client populations served by adventure therapy programmes. Furthermore, much of the literature to date has been written about processes, skills and techniques but not directly about leadership competences. Even Mike Gass' seminal work on adventure therapy (Gass, 1993a) does not include a chapter on leadership competences for adventure therapists.

There are a number of sound reasons for this shortage of domain specific literature and cultural wisdom. Amongst them is the fact that adventure therapy is not a well established or homogeneous field (Gillis, 1993). In different countries it has different flavours and there is not accord on where adventure therapy fits with other professions and disciplines. In America many would put it as a subset of group psychotherapy and counselling. In New Zealand there is an increasing movement towards programmes that cater specifically for Maori youth and hence could be seen as cultural interventions rather than therapeutic programmes. In Australia few people would know what the phrase "adventure therapy" meant yet there are a number of excellent outdoor based therapeutic programmes (Sveen, 1993). In the UK adventure therapy appears to have sprung both from adventure education and from programmes for adjudicated youth (Barrett, 1992; Barrett, 1993).

Nonetheless, in this paper I write as if "Adventure Therapy" exists as a single recognised field. I have amalgamated Zeig's definition of psychotherapy (Zeig, 1990, p 14) with Gass' principles of adventure therapy (Gass, 1993e) to arrive at a broad based definition. In the context of this paper, adventure therapy is taken to be

a class of group based change oriented experiential learning processes that occur in the context of a contractual, empowering and empathic professional relationship. Its rationale explicitly or implicitly focuses on the personality and behaviour of clients, the strategic application of adventure activities to engender personal change in clients, or both. Durable change in multiple aspects of clients' lives is sought. The processes involved are idiosyncratic and determined by a complex set of interrelated factors such as the interaction between clients, the adventure therapists, the environment, the activities carried out and the social environment that provides a context for the programme.

The decision to write as if adventure therapy exists as a recognised field is based more on expediency than on my belief in the truth of the premise. Yet given that language creates reality (Bateson, 1972), this decision is not trivial and it foreshadows the need for practitioners to develop a shared language to describe the skills, knowledge and attributes required to perform their work (Cline, 1993; Roland, 1993). This paper is intended as a contribution to that effort.

As yet few have dared to say "This is adventure therapy", although Mike Gass' book (Gass, 1993a) *Adventure Therapy* does provide a significant start. Furthermore, few authors have attempted to define the field and outline the competences required by adventure therapists. There are many reasons for the absence of a definitive work and these are examined below. First, though, it is necessary to describe the context for the genesis of this paper and the models that are implicit and explicit in the paper itself.

Psychotherapy or experiential learning? The author's position

No author can be truly value free (Bateson, 1972; Zeig, 1900) and most naturalistic researchers require as a prerequisite for validity of the research that the author articulate his/her underlying epistemology. This paper is in effect a research report. The author, through the selective application of his attention and interest has distilled a (hopefully) coherent set of concepts and principles. He has discarded hundreds of possible references in the field of adventure therapy and included others from "outside" the field. What principles have guided his eyes and his hand? In the following brief section the author describes his current underlying assumptions about adventure therapy and the context in which it occurs. It is my belief that:

- Adventure therapy is a socially constructed artefact of Western society and is a special field that finds its place at the meeting point of adventure education and psychotherapy (Gillis, 1993);
- The goals of the various forms of therapy and personal development are many and varied and are largely determined by the context in which the clients and programme exist. There are no universally desirable therapeutic goals (Freeman, 1993).
- Adventure therapy is a form of experiential learning (Gass, 1993e).
- The techniques developed by most schools of psychotherapy can be gainfully applied in adventure therapy; each in particular circumstances (Zeig, 1990).
- Human beings exist in a complex social and environmental system, so that simplistic cause/effect principles and the techniques based on positivistic principles are seldom applicable to human behaviour (Bateson, 1972; Bateson, 1988). (In short, the author favours systemic approached);
- The levels of arousal involved in many adventure therapy programmes, combined with the level of dysfunction displayed by many participants call for the knowledge and skills of persons trained to deal with extreme forms of "acting out" behaviours. (In psychodynamic terms it could be said that many participants in adventure therapy programmes display developmental deficits such that trained psychotherapists are needed to assess and/or work with some of these clients). (Cline, 1993; Smith, 1993; Tippet, 1993).

Lastly, the author is an educator/trainer/consultant who specialises in small group process. He is neither a psychologist nor a psychotherapist.

These are the lenses that magnify and sharpen some aspects of the author's world and the frames that prevent him from seeing more. With this particular vision, let us now continue with a summary of the context that has made it difficult for writers to define competences for adventure therapists.

Difficulties in identifying competences for adventure therapists

Within the existing field of adventure therapy, there is a multiplicity of professions, epistemologies, techniques, activities, programme structures, catchment populations and funding milieu. Practitioners need to be able to match language and frameworks of funding agencies, evaluators, clients, referral agents, critics, umbrella organisations and in some cases different members of staff from a wide range of professions.

Hence, the very diversity in adventure therapy programmes means that each practitioner must by necessity have a different set of competences from the next. More specifically, the diversity in adventure therapy can be seen as:

- **multiple professional contexts:** programmes and practitioners operate in four main contexts: education, psychotherapy, criminology/rehabilitation and occupational therapy (Therapeutic Recreation);
- **multiple underpinning therapeutic frameworks and epistemologies:** These include psychodynamic, humanistic and experiential, behavioural, cognitive, philosophically oriented, eclectic and integrative, family and systemic as well as hypnotherapy and Ericsonian (Zeig, 1990);
- **the range of therapeutic orientations** is as vast as the range of underlying epistemologies. Some examples of therapeutic orientations include: Neuro linguistic programming (Bandler, 1975), Reality therapy (Glasser, 1965), Psychodrama and clinical role play (Blatner, 1988; Kipper, 1986; Williams, 1989; Willis, 1991), Gestalt (Perls, 1969), Rational-emotive therapy (Ellis, 1987), Therapeutic metaphor (Gass, 1993c) and Brief therapy (Bacon, 1993).
- **diverse client bases, presenting problems and selection criteria.** Gerstein (1992a) noted over 12 different "populations" (eg corrections, youth at risk) from which clients may be drawn. For example, "Youth-at-risk, psychiatric inpatient, juvenile corrections, addictions, sexual victims and perpetrators, etc (p3).
- **diverse and sometimes multiple funding sources.** The main arenas from which funding is derived for programmes are: government, profit and charity. An additional complexity is added by the multiplicity of "tags" that accompany funding. Some examples are juvenile justice, mental health, physical health, rehabilitation and education. Each funding source influences the shape of the programme, the programme goals and the language used to describe the programme.
- **a wide range of activities carried out as a context for therapeutic activities.** For example, Gerstein's questionnaire (Gerstein, 1992a) included 10 suggestions: Group initiatives, residential camp, rappelling, canoeing/rafting, ropes courses, backpacking, biking, wilderness trips, rock climbing and service projects. Many other activities are used in adventure therapy programmes.
- **a wide range of interrelationships with other programmes.** For example, some adventure therapy programmes exist as the primary intervention for their clients whilst some are adjunctive to say, psychiatric or social work programmes (Gass, 1993f; Handlye, 1993 (September));
- **a variety of programme structures.** Two factors in programme structure are staff utilisation and longitudinal design. Staff utilisation varies because some programmes employ mental health professionals such as family therapists, clinical psychologists or psychiatrists to do intensive individual or group work with clients whereas some expect the adventure therapist also to be a trained psychotherapist.

Longitudinal design varies in the degree to which programmes do their own preliminary work (advertising, recruitment, selection and induction) and the degree to which they do their own follow-up treatment, and evaluation. Additionally, some programmes involve parents or "significant others" or even citizens from their local communities (Henley, 1989; O'Brien, 1990) whereas some work almost in isolation.

Summary

Adventure therapy is a term that at this stage can be said to provide a focus point for a diverse class of activities, setting, client groups, epistemologies, professional interests and goals. As yet no definitive set of leadership competences has been identified as appropriate for adventure therapists across the board and whilst such diversity remains, there is no possibility of a definitive set of competences being identified and agreed upon by those involved.

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